

# CLAIMS ONLY

SERIAL NO.	FILING DATE
APPLICANT(S)	

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		*	*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.
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39	1										
40	1										
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46											
47											
48											
49											
50											
TOTAL IND.		↓		↓		↓					↓
TOTAL DEP.		←		←		←					←
TOTAL CLAIMS											
51		1									
52	1										
53		1									
54		1									
55	1										
56	1										
57		1									
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100											
TOTAL IND.	10	↓		↓		↓					↓
TOTAL DEP.	60	←		←		←					←
TOTAL CLAIMS	70										

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS